

Following that vote, the Senate may turn to the consideration of any legislative or executive items cleared for action. As a reminder to all Members, a vote has been scheduled to occur at 2:20 p.m. Tuesday, September 22 in relation to the KENNEDY minimum wage amendment.

ORDER FOR ADJOURNMENT

Mr. SANTORUM. If there is no further business to come before the Senate, I now ask unanimous consent the Senate stand in adjournment under the previous order, following the remarks of the Senator from Pennsylvania or any person he should yield to.

The PRESIDING OFFICER (Mr. DEWINE). Without objection, it is so ordered.

Mr. SANTORUM. Thank you, Mr. President.

PARTIAL-BIRTH ABORTION

Mr. SANTORUM. If I can, let us return to the issue that we have spent a great deal of the day debating. I know the hour is late. Let me thank the staff who are here, the pages, and others. The pages are actually very happy I am up here talking, because if I talk for a little while longer they will not have school in the morning. So that will be a good thing for them—as I see the smiles down there and the encouragement to wind it up and get going.

I thank the Senator from Arkansas for his indulgence in presiding during these remarks. But as I mentioned today, I think this is one of the most important issues we can face here in the U.S. Senate. As the Senator from Ohio eloquently said, it begins the process of defining who we are as a country and what will become of us as a civilization if we do not begin to draw lines where lines need to be drawn.

I just find it remarkable that we seem to create these fictions when it comes to life. When it comes to the life of little children, we create this fiction in our mind. And it was a fiction that was created back when *Roe v. Wade* was decided that these were not really babies.

We did not have good ultrasounds then and the kind of technology where we could really see how developed these little babies were in the womb. They were just sort of passed off as these sort of blobs. Yet, we now know, through the miracle of ultrasound, and other techniques, that these are precious little developing babies.

It is very difficult as a father who has seen those ultrasounds of our children to dismiss the humanity, that my wife Karen was carrying a blob of tissue or something that was prehuman. But we tell these lies to ourselves in order that we can go on and in order that we can sort of live with our own internal inconsistencies.

One lie you cannot tell, one lie that is inescapable—inescapably alive—is

the lie of partial-birth abortion being something that is medically necessary or that simply this baby is just sort of this blob of tissue. This baby is outside of the mother. Its arms, its legs, its torso, outside of the mother—just inches away from being born.

One of the things I often marvel at—and I just do not understand—is why wouldn't you, if you have gone through the process, as I described earlier today, of dilating the cervix over 3 days, reaching in with forceps and pulling the baby out in a breached position, which is dangerous, again, for the baby and mother, and you deliver that entire baby, why wouldn't you just let the rest of the baby come out?

Why is it necessary to protect the health of the mother at that point in time—now that you have gone through all this other procedure—at that very crucial moment when the doctor takes those scissors and begins the process of killing that baby? Why at that moment is the mother's health in less danger if you kill that baby than if you just gave that little, helpless, defenseless and, yes, even at times imperfect life the opportunity for life?

Why does that so endanger the mother to do that? Why is it necessary to thrust these Metzenbaum scissors into the base of the baby's skull? Why is it necessary to suction the baby's brains out?

So many doctors have described to me in testimony—and today at a press conference—the complications resulting from this blind procedure where the physician has to feel for the base of the neck and could slip and miss. As the Senator from Tennessee testified today, there are large vessels, blood vessels within a centimeter from the point where this procedure is done that a minor miss could lacerate and cause hemorrhaging and severe complications, or by thrusting the scissors in the back of the neck, through a bony part of the brain, you could only imagine what would happen to the skull of that baby and what damage that skull could do to the mother.

How can we—how can we—continue to contend or pretend that this is healthy for the mother to end this baby's life when it is this close and a delivery could be performed? Let's get away from that charade because it is a charade. It is not about the health of the mother; it is about killing a baby. It is about making sure, beyond any certainty, beyond any doubt, that the result of this abortion you are going to have is a dead baby.

That is what this is about. This is about a lethal form of abortion, not a healthy form for the mother—far from it. Even folks who disagree with this legislation will tell you that this very well may not be the safest form. In fact, that organization has not done any studies to prove it is safe, that is, the American College of Obstetrics and Gynecologists. They have done no studies to prove that this procedure is safe, that this procedure is preferable.

They say—they say—and I will quote them—they say:

[We] could identify no circumstances under which this procedure . . . would be the only option to save the life or preserve the health of the woman.

That is an admission by the organization that all those in opposition to this bill use as their medical shield. Listen to what they say. They never read this part of the letter. They only read the second part, which I will read to fully disclose. I will read it again, an ACOG policy statement emanating from the review declared that:

A select panel [the panel they selected to review this] could identify no circumstances under which this procedure [partial-birth abortion], would be the only option to save the life or preserve the health of the woman.

They went on to say that a partial-birth abortion:

. . . however, may be the best or most appropriate procedure in a particular circumstance to save the life or preserve the health of a woman.

They say that:

. . . only the doctor, in consultation with the patient based upon the woman's particular circumstances can make this decision.

That is what you hear from the other side. What you do not hear from the other side is that this report lists no circumstances to support that claim. They can give, and in fact have given—this was written well over a year ago—they have given no medical situation, no scenario, no hypothetical where what they say may happen would, in fact, happen, which is that a partial-birth abortion would be preferable to some other procedure. They just think it might.

Now, I might be wrong, but there are probably very few things that are happening in obstetrics today that haven't happened for the past several years. There are not a lot of new things coming up. There are problems that come up routinely. There may be some strange problems; they are probably not new.

To make this kind of statement and support it with no evidence is irresponsible. To use this organization and this statement as a shield when they cannot provide one single example where this procedure would be preferable, again, just builds up the record that I have laid out. This entire debate is based upon a series of misleading statements to try to divert attention away from the horrible, barbaric reality and the fact that this is not a medically necessary procedure.

I want to get back for 1 minute to the issue of life of the mother which I addressed a few minutes ago. I said I would read the piece of legislation itself to put to bed, if you will, any concern by anyone who might be listening that there isn't a legitimate life-of-the-mother exception. I noted the American Medical Association's letter of endorsement of this bill. They believe there is a legitimate exception if the life of the mother is in danger.

Let me read the actual legislation, the paragraph on prohibition of partial-birth abortion:

... shall not apply to a partial-birth abortion that is necessary to save the life of a mother whose life is endangered by a physical disorder, illness, or injury.

Now, I cannot imagine a life-of-the-mother situation this does not cover. In fact, I don't recall any example from the other side of a life-of-the-mother situation that this does not cover. They just say it is different from other life-of-the-mother exceptions that we put forward. But they don't say where the "hole" is in the exception.

I think it is very clear and very certain that there is an adequate protection in that case.

I will say that I cannot imagine—and I have talked to many physicians on this point—I cannot imagine a woman coming into an emergency room where her life is in danger, whether she is hemorrhaging or has preeclampsia—I can't imagine a doctor, being presented with this emergency case where they must act within a short period of time, saying, "We are going to dilate your cervix over a 3-day period of time and we will perform this procedure." That just wouldn't happen. It is almost absurd to suggest that this would actually be used in a situation where the life of the mother was threatened.

Yes, there is a life-of-the-mother exception, but there is absolutely no circumstance I could conceive of—and I don't recall any information from any of the medical experts by the other side coming out and saying medical experts believe that there is a case where the life of the mother is in danger in an emergency situation where they may use this. I don't think they even made claims of the woman presenting herself to a hospital or a clinic, where her life is in danger, that any practitioner would use a 3-day procedure.

While there is a life-of-the-mother exception in there, and I think it is a solid one, it is certainly not one that I believe will ever be used, because this procedure certainly doesn't comport with a life-threatening situation because of the time it takes.

Since I have the AMA letter here, I want to read it. I think it is important for the RECORD to reflect the support of the American Medical Association, "physicians dedicated to the health of America." That is their saying under their logo.

They say:

Our support of this legislation is based on three specific principles. First, the bill would allow a legitimate exception where the life of the mother was endangered, thereby preserving the physician's judgment to take any medically necessary steps to save the life of the mother. Second, the bill would clearly define the prohibited procedure so that it is clear on the face of the legislation what act is to be banned. Finally, the bill would give any accused physician the right to have his or her conduct reviewed by the State medical board before a criminal trial commenced. In this manner, the bill would provide a formal role for valuable medical peer determination in any enforcement proceeding.

The AMA believes that with these changes, physicians will be on notice as to the exact nature of the prohibited conduct.

Thank you for the opportunity to work with you towards restricting a procedure we all agree is not good medicine.

Not good medicine.

With respect to the points they make, many of the courts—while some have validated the statutes, some of the courts have been concerned about vagueness, of what procedure we are actually defining.

We worked with the American Medical Association to come up with a new definition, a tighter definition that put the physician, as they say, on notice as to the exact nature of the prohibited conduct, which I think is important to meet constitutional scrutiny.

Second, we provide an opportunity for the procedure and the conduct of the physician to be reviewed by the State medical board to see whether, in fact, it was necessary under some circumstance, which was an important peer review element that we think is a safeguard, if you will, for the physician.

A couple of other points that I want to make before I go back to talking about what I was talking about when we had to conclude debate earlier today.

This is a picture of a young man by the name of Tony Melendez. That is Tony. Tony Melendez will be here in Washington tomorrow up in the Senate gallery watching the vote on partial-birth abortion, because Tony's disability, Tony's handicap, is one of the disabilities that has been mentioned here on the floor as a good reason to perform a partial-birth abortion.

Senators come up and say there are children who will be so grossly deformed. They may be blind—I am not making this up; this is what was said—blind, or without arms or without legs, and they went on with other deformities. Well, Tony Melendez is a thalidomide baby. Tony Melendez doesn't have any arms. Tony Melendez was born in Rivas, Nicaragua. His father was a graduate of the International Academy of Agriculture in this town and had a good job in the sugar refinery.

Sara, his mother, was an elementary school teacher. They had their first child, named Jose. In the summer of 1961, she had a second pregnancy. She was given thalidomide to treat her morning sicknesses because it was hailed as a safer alternative to other sedatives to deal with morning sickness. On January 9, 1962, Sara gave birth to Tony. He had no arms, 11 toes, and a severe club foot that would require surgical repair if he were ever to have a chance to walk. He was typical of babies who were exposed to thalidomide at the early stages of pregnancy.

Well, his family was very concerned about showing the baby to the mother because of the fear of her reaction. When they did give little Tony to his mother, she embraced her child with the confidence that he would live a full and meaningful life, regardless of his flaws. Still there was question of how he could live a normal life with no

arms. Young Tony answered the question one day when he was in his crib. His mother had put away the toys that he had been given as gifts because she assumed he would be unable to enjoy them. However, Tony showed he could play just like any other child when a red balloon landed in his crib. He began bouncing it up and down with his feet, laughing and giggling. She placed the toys in the crib and vowed that day that she would never assume Tony could not do anything because of his disability. She would let him try.

Tony needed corrective surgery for his club foot. Since Nicaragua did not have adequate facilities, or the level of care he needed, they went to Los Angeles. Due to the nature and length of time involved in Tony's corrective surgery, the family decided to stay in the United States and become citizens. Tony spent most of his childhood in Southeastern California.

Tony enjoyed sports, particularly volley ball—volley ball?—where he would hit the ball with his head back over the net. And, of course, he liked soccer. As a sixth grader, Tony wanted to play a game that the neighbor kids were playing, in which his brother Jose excelled—basketball. He tried, with great difficulty, with his feet to do what his peers did so easily with their hands. After being told by his brother that he could not do it, he was determined to do it, and despite blistering and even bleeding toes, one day he eventually succeeded. The one thing Tony hated more than anything else was growing up and not being treated as an equal. When once asked whether he preferred to be called handicapped or disabled, Tony responded that he would like to be called "human."

At the age of 14, in high school, he demanded to be transferred out of a handicapped class to the regular classroom with students. He was allowed to go to a normal gym class. In his first gym class, he was watched intensely by the others when class started. Jumping jacks? How would a kid with no arms do jumping jacks? The other kids tried to determine that, and they watched and tried to be subtle in looking. And Tony jumped and shouted and counted in unison with the others. The rest of the class accepted him readily.

In his teenage years, Tony showed a talent for music. He learned to play the guitar with his feet. At first, he played at various events, such as weddings, funerals, and special events at his church. Eventually, he turned his guitar talent into a full-time vocation. Here is a picture of Tony Melendez today. In connection with his church, he would also talk to groups of kids about his story and how one can overcome difficulty. Tony's life was such an inspirational story, and he was selected to be a "gift" to the Pope by a Catholic youth group during a papal visit to California in 1987. Tony gave a performance to a live audience of 6,000 at the Universal Amphitheater in Hollywood. He performed at World Youth

Day in 1991 and World Youth Day in Denver 1993. He also has appeared on numerous television shows and performed at major sporting events, recently singing the National Anthem at Yankee Stadium, I believe. Tony now resides in Dallas, Texas.

Why do I talk about Tony Melendez? Today on the floor of the Senate, the Senator from California referred to some people up in the galleries as women who needed to have partial-birth abortions, and that they would be here tomorrow standing in the Halls staring at Senators as they walked in here to make sure they knew—that we knew they were there to keep this procedure legal. Tony Melendez, and so many like Tony who are not perfect in the eyes of our society—but, of course, are perfect in the eyes of God—will be there also to represent the millions of little babies who could not be there themselves, to remind every Member that walks on this floor that there is a severe cost, a human cost to what we will be voting on tomorrow. And the ones who have the arrow or the bull's-eye on their back, who are the target of partial-birth abortion—at least if you believe the arguments on the other side—are people like Tony Melendez who, because they are not perfect, don't deserve to live.

I have always found it ironic, and I will never forget the last time we brought this bill up on the floor of the Senate. I remember standing here waiting for the debate to begin and working on some remarks, and the debate that was going on around us. The vote that was finally taken was on a bill to provide individuals with disabilities the right to an education in a classroom. I will never forget the Members, many of which oppose banning partial-birth abortions; I will never forget those Members coming to the floor and standing up with passion, which I respect, admire, and support, about how children with disabilities should have the right to live a fulfilling, complete life, and should be given rights to education. Or as they did under the Americans With Disability Act, where they should have the right to public transportation, the right to have access to buildings, to cut the curbs at the corners so they can have access to sidewalks—rights, rights, rights—with the passion that was the hallmark of liberalism in this country—until this issue, because with the very next vote they cast they made this statement: If you can survive the womb, we will defend your rights. But we will not defend your right to be born in the first place. In fact, you are the very reason this procedure needs to continue, because we don't want you. You are not what we are looking for in people.

What a loss this country would have without Tony Melendez. But had partial-birth abortions been around when Tony was in his mother's womb, many on this floor would stand up and argue that he is just the kind of baby that we need to get rid of with this procedure.

The Bible says, and Abraham Lincoln quoted, "A house divided against itself cannot stand." You cannot stand up and passionately argue for the rights of the disabled, and with the same breath not give them the right to exist in the first place. It doesn't make sense. It isn't logical or rational. Oh, it may be political; it may make sense because little babies in the womb don't vote, but it makes no logical sense, and it makes no moral sense to draw that line where it doesn't exist.

The Senator from Illinois said today that we should not have this debate with anecdotes. Yet, this debate has been all anecdotes on the other side because the facts are not in their favor. So I thought it was important to present some anecdotes on the other side, to lay out what we are missing. Tony's is a happy story, but earlier today I talked about some stories that were not so happy. The endings were so fairy tale-like.

Let me talk about another one of those stories—a little girl named Mary Bernadette French. In 1993, Jeannie French was overjoyed to learn she was pregnant with twins. Four months into her pregnancy, tragedy struck and Jeannie learned her daughter Mary was not developing normally.

Specialists identified an opening at the base of the baby's neck. Mary was diagnosed with occipital encephalocele, a condition in which the majority of the brain develops outside the skull. Prospects for a normal life for the child were very dim. Jeannie's doctors advised her to abort Mary due to the severity of the disability and in order to reduce the complications of the twin birth.

What a horrible thing she must have had to deal with—two lives within her, one, according to the doctor, potentially threatening the other. Because Mary could not have survived normal labor, Jeannie and her husband opted for a cesarean section. In December of 1993, Mary was born 1 minute after her twin brother, Will. Hospital staff promptly moved Will to the nursery. Mary stayed with her parents, was welcomed into the world by her parents, grandparents, and close friends of the family. Mary was held, loved, and serenaded for 6 hours. She quietly passed away that afternoon.

That is little Mary in the arms, I believe, of her grandmother.

In memory of her daughter, Jeannie French testified in favor of the ban on partial-birth abortions before the Senate Judiciary Committee. She explained that Mary's life was short but meaningful. She entreated the committee: "Some children by nature cannot live. If we are to call ourselves a civilized culture, we must allow that their death be natural, peaceful, and painless. And if other pre-born children face a life of disability, let us welcome them into society with our arms open in love."

For the RECORD, Jeannie French requested meetings with the President,

pleading with him on more than one occasion to listen to a fellow Democrat, she said, who is on the other side of the debate. She explained in the letter:

We simply want the truth to be heard regarding the risks of carrying disabled children to term. You say that partial-birth abortion has to be legal, for cases like ours, because women's bodies would be "ripped to shreds" by carrying their very sick children to term. By your repeated statements, you imply that partial-birth abortion is the only or most desirable response to children suffering severe disabilities like our children.

What she showed is that instead of giving her child a death sentence, she found it within herself to love that child. She found it within herself to name that child, to welcome that child into the family, to commit to that child as a child who will always be part of the family, who will always be in her memory and in the memory of her twin brother—not a bag of tissue discarded and executed, ignored, and put behind them, but loved, accepted, welcomed, and committed to memory; with pain, yes, but with the knowledge that in the 6 hours that little Mary Bernadette French lived, she knew love. She was loved by her mother and father. What greater gift can a parent give? What a life, as short as it was, to know only love and her parents.

Jeannie continues her efforts today to educate the public about partial-birth abortion. She also works to ensure that people know that the lives of disabled children, while short, are sometimes painful and not in vain because they teach us so much about us.

Finally, a case—I hate to say "case"; a little girl—a little girl who I talked about a lot last year, a little girl by the name of Donna Joy Watts who, with Tony Melendez tomorrow, will be here as another example—in this case, a real life example—of how a mother, who was not only asked and encouraged but almost forced to abort her child, could not find a hospital to deliver her child.

The Watts family, Donny and Lori Watts, had to go to three hospitals in Maryland to find a hospital that would deliver their child. We hear so much talk on the floor about, "We need to make sure that women have access to abortion." What we are finding out and what I have found out through this debate is that we actually need to make sure that women who want to deliver their baby have access to a hospital to deliver their baby and have access to care once that baby is delivered.

The Watts ended up at a hospital in Baltimore. Their daughter was diagnosed with multiple problems. Hydrocephalus was the principal one. Again, hydrocephalus is water on the brain. She had so much cerebral fluid that it impeded the normal development of the brain. In her case, they believed that she had little to no brain. But the Watts family said they were going to move forward, that they were going to accept and love their child, and they wanted to deliver their child and give it every opportunity for life.

At every step of the process, even the last step, the OB/GYNs recommended abortion, because not only did she have hydrocephalus but part of her brain was developing outside of her skull, and that this baby had no chance of survival.

She was born on November 26, 1991, through cesarean section. Again, an option available for hydrocephalus, because the baby's head is too big to go through the birth canal, is to do a cesarean section. There are other methods: Draining the fluid from the head and then delivering through the vagina. In this case, they chose cesarean section.

She was born with very serious health problems. The most remarkable thing after the birth was that the hospital staff made no attempt to feed her in the traditional sense. The doctors at the University of Maryland where she was delivered believed that Donna Joy's deformities would prevent her from suckling, eating, or swallowing. Because a neural tube defect made her feeding difficult, Donna received only IV fluids for the first days of her life. But Lori refused to give up. Initially, she fed breast milk to Donna Joy with a sterilized eye dropper to provide sustenance, because they wouldn't feed her. Then, at 2 weeks of age, the shunt that was placed in Donna Joy's head—by the way, the shunt. It took 3 days for Lori and Donny to convince the doctors to do an operation on her brain to relieve the pressure from the fluid. The doctors thought she was just going to die, so they didn't want to treat her. But finally after 3 days of pounding away at the doctors they did the procedure. Two weeks later, the shunt, which allows the fluid to drain from the brain, failed, and she was readmitted to the hospital for corrective surgery.

When the tray of food was delivered to their hospital room by mistake, Lori had a brainstorm. She mashed the contents together, created her own food for the newborn with rice, bananas and baby formula, and she fed the mixture to the baby one drop at a time with a feeding syringe. Unfortunately, Donna Joy's fight for life became even more complicated.

After 2 months, she underwent an operation to correct occipital—I won't get into the terms but another problem. After 4 months, a CT scan revealed that she also suffered from another condition which results from an incomplete cleavage of the brain. She also suffered from epilepsy, sleep disorder, and continued digestive complications. In fact, the baby's neurologist said, "We may have to consider placement of a gastronomy tube in order to maintain her nutrition and physical growth."

She still had hydrocephaly, or water on the brain, and she couldn't hold her head up because it was so heavy. She suffered from apnea—in other words, a condition where breathing spontaneously stops. She had several brushes

with death. She had undergone eight brain operations.

Finally, through all of that trauma and all of the problems, she survived and she will be here tomorrow. Donna Joy continues to be, at 6 years of age, an inspiration. She continues to battle holoprosencephaly, hydrocephalus, cerebral palsy, epilepsy, tunnel vision, and Arnold-Chiari Type II malformation that prevents formation of her medulla oblongata.

Despite these hardships, having only a small fraction of her brain, she runs, walks, plays, has a healthy appetite and even likes Big Mac's, and she is taking karate lessons now. She has earned her white belt and performed in karate demonstrations.

Before Donna Joy moved to Pennsylvania, Greencastle, PA, Franklin County, Maryland Governor Parris Glendening honored her with a certificate of courage commemorating her fifth birthday. Mayor Steve Sager, of Hagerstown, MD, proclaimed her birthday Donna Joy Watts Day. Members of the Scott Bakula Fan Club, who is someone who helped Donna Joy get through some very difficult times with his songs, have sent donations and Christmas presents to the Watts family. People from around the world have learned about Donna Joy on the Internet and write, e-mail her, and send her gifts. But perhaps the most important thing was because of Donna Joy's determination, it inspired a Denver couple to fight for their little boy under similar circumstances.

This is Donna Joy's story, this little girl who was considered by the medical world as somebody who was not worthy to live, someone on repeated occasions who would have been aborted using partial-birth abortion, who I have had the time to spend time with, and my children have, too. She is not a burden, although I understand from Lori she can be a handful like any other 6-year old. She is not a heartache or a sorrow, as some would describe children with disabilities who need to be aborted. She is a beautiful, marvelous, wonderfully made gift from God, who has inspired so many to understand just that fact. She will be here tomorrow, possibly standing next to the women who want to keep this procedure legal, so we can kill people like Donna Joy Watts in a brutal fashion, in an inhumane fashion, in a painful fashion, in a fashion, as I quoted today from the AMA Journal, that would violate Federal regulations on the treatment of animals used in research. We could not do to animals used in research legally in this country, we could not do what we do every day in this country to little babies because they are not wanted, in some cases not wanted because of their deformity but in the vast majority of cases they are just simply not wanted. What a high price to pay for one person not wanting you to be around, the ultimate price to pay.

Tomorrow, we are going to have the opportunity to show the world the di-

rection the United States of America is taking. We are involved right now in a moral crisis in this country, on the front page of the paper every day. It is no wonder that we are in a moral crisis.

Back in 1972, 1973, when *Roe v. Wade* was decided, many people said that this was going to be a breakthrough for women and for children, that all these wonderful things would happen to our society as a result, to children and to women, as a result of the legalization of abortion. We would eliminate unwanted pregnancies, and the result of that would be less child abuse because we wouldn't have all these children nobody wanted, illegitimacy would go down, child poverty would go down because we wouldn't have all of these poor kids around that we don't want. Spousal abuse would go down, divorce would go down, less complications in marriages and relationships.

It is a cruel joke. It almost seems laughable to think back 25 years and look at what has happened on every single count. All of the culture indicators that I mentioned go down worse and worse and worse. Those who feared *Roe v. Wade* back in 1973 were very much on target. The fear was that we would lose respect for life and that we would become so insensitive to life that abortion would be just the beginning of the end of our selectivity of who we include in our society.

And so it has gone, to the point where now we can't even save a little baby almost born. I wish that were the worst. We now have State-assisted suicide laws. We now have debates, active debates on euthanasia. We even have an article from a professor at MIT who argues, or at least makes the case for infanticide—not infanticide on partial-birth abortion but actual infanticide. And then we have the cases of promom and the Delaware couple and so many others where we hear around the country of babies being born and then murdered shortly after birth. The initial reaction, while horror, at the same time is sympathy—sympathy for this difficult situation in which these children or kids were put.

We somehow see little children, little babies, different than older children. Older children—if you have killed your older children, that is really bad. We have no sympathy for you. But somehow, if you killed a baby just born we try to figure out a way to get around it. We try to figure out a way that that does not quite meet the threshold of murder. If you look at the punishments meted out—substantially lower. They are substantially lower than other murder cases. We just do not value those little babies as much.

Why? Why? Is it any mystery why? If we start, as we have, down the path of not valuing those little babies because we do not value them in the womb, or four-fifths outside the womb, or just newly outside the womb, who is next? Look around. Who is going to be next? Who is going to be the next group of

people who we are not going to value, who does not have the might to force down what they believe is right? I made it. I am here in this body. I am whole. I am healthy. If you have not made it yet, watch it, because it then depends on whether you are on the committee that decides, or you are on the court that decides who lives and who dies. Because there is no line anymore. There is no truth on which we are basing this. There is no "life or nonlife." There is might. There is political power and that is what deter-

mines who lives and dies, who is valuable and who is not.

Tomorrow, 34 Senators can exercise their might on who lives and dies. They can decide for a country that a group of people, a group of little helpless babies, do not belong.

I am hopeful that when tomorrow comes, after much prayer tonight by so many people all over the country, and the world, that three more Members will open their eyes when they wake up in the morning and realize that but for the grace of God, there go I, and that we have to open our hearts more and

include the least among us, the little children.

Mr. President, I yield the floor.

ADJOURNMENT UNTIL 8:30 A.M.
TOMORROW

The PRESIDING OFFICER. The Senate, under the previous order, will stand adjourned until 8:30 a.m., Friday, September 18, 1998.

Thereupon, the Senate, at 10:21 p.m., adjourned until Friday, September 18, 1998, at 8:30 a.m.